

ALEX SMITH CHIEF HUMAN RESOURCES OFFICER

FREQUENTLY ASKED QUESTIONS (FAQS)

What is happening?

Health plan administrators, such as BCBST, periodically renegotiate network agreements for medical services with health systems to maintain competitive pricing. This year, BCBST requested a new contract with Methodist for medical services at hospitals and outpatient facilities owned by Methodist, including Le Bonheur Children's Hospital, which are currently in the City's network under the Select and Choice medical plans.

BCBST and Methodist were unable to reach an agreement as of January 1, 2023. This means that medical services at Methodist/Le Bonheur will now be considered "out of network", and the costs will be higher.

If Methodist is no longer in the BCBST Network after January 1, 2023. Does this mean I might not be able to continue to see my doctor?

No, this only impacts the costs of services at Methodist hospitals and outpatient facilities. It is not related to contracts with physicians or physician groups. This means that employees should not see a reduction or change in the choice of physicians in the network. Most physicians have admitting privileges at Baptist Memorial Hospital and Methodist in the Memphis area. Many also have admitting privileges at St. Francis Hospital.

What happens if I need emergency room services, or I am taken by ambulance to a Methodist based hospital or if a Methodist-based hospital's emergency room is the one closest to me?

Emergency room visits will always be covered with the plan designated copayment, regardless of facility affiliation. Your emergency care will be covered in-network under your health plan's emergency room coverage. If you are admitted to the hospital from the emergency room, the inpatient stay will be covered at the in-network benefit level until you are stable and ready to be transferred to an in-network facility.

Transplant Facilities at Methodist – Will our employees still be able to use Methodist facilities for transplants?

Based on City's communications, Methodist is allowed in network for 30 days. Beyond 30 days would be out of network coverage unless the member qualifies for a continuation of care (CoC). If CoC is approved, the member would have in network benefits up to 90 days under ACA's 'No Surprise Billing' rule if care is continued at Methodist. Please know our clinical team will work with the member on transplant network options.

Lab Work at Methodist – Will our employees who have a PCP at Methodist be charged out of network?

At the time of visit, the member should remind their physician to send the lab work to a network lab should Methodist remain out of network.



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Minor Med Facility - Is this facility part of the Methodist network?

Methodist Minor Meds are not impacted by the negotiations for Network P (Choice Plan). Methodist Minor Meds are out of network for Network S (Select Plan).

MOGA (Memphis Obstetrics & Gynecological Association)

Provider groups are not impacted by the Methodist/Le Bonheur Negotiations.

Capacity at Baptist/St. Francis Children's services – Can they handle the new volume?

Neither facility has expressed concerns with taking care of new patients. Please notify us if anyone has issues receiving care.

If my child is going to Le Bonheur Outpatient Center to see a specialist that is not their primary care doctor, will it be covered?

The coverage will be covered in network up to 90 days starting 1/1/2023.

What if I have other questions?

Contact the BCBST Customer Service Center at 888-796-0609 or Total Rewards at 901-636-6800 or email benefitsquestions@memphistn.gov.